SDAFFTTT Date Time Stamp AT

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(Signature of Traveler)

COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION

Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. Only complete this form if you need to submit an amendment to a posttravel filing you have already submitted. SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILD Senator Thomas R. Carper Name of Traveler: Carper Employing Office/Committee: Private Sponsor(s) (List all):______ Travel Date(s):____August 9-15, 2017 Amended RE-3 Form Description/Title of Attached Forms: RE-3 Form must be Purpose of Amendment (describe the reason for amending original submission): amended with the Office of Public Records in SH-232. 9/1/17

(Date)

8/28/17

(Date)

(Revised 1/3/11)

SENATORS AND	OFFICERS	POST-TRAVEL
DISCLOSURE	OF TRAVE	L EXPENSES

Date/Time Stamp:

FIFE: 1777 TELIATE

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This disclosure, along with a copy of the Private Sponsor Travel Certification Form and all attachments, MUST be provided to the Office of Public Records, Room 232 of the Hart Building, within 30 days after the travel is completed.

niiaiug, wiwin 30 ac	ays after the travel is cor	npleted.		
compliance with	Rule 35.2(a) and (c), I		n. Tom Carper	, make the following
eclogures with rest	pect to travel expenses	(Nome of S	Senator/Officer)	ald Can and
acioanica mini ical			-	
rivate Sponsor(s) (l	ust an):		ongressional Prog	
raver date(3):		15, 2017 (Tri	p extended thro poses and paid	ough August 19, 2017, for per for with personal funds.)
USIO :(s)nation	, Norway			
- -	ring family member (if	* *	arper	
LL IN THE APPRO	PRIATE LINES. IF THE DENT CHILD, ONLY I	E COST OF LODGE	ING DID NOT INCRE G COSTS IN EMPLOY	EASE DUE TO THE ACCOMPANYING YEB EXPENSES. (Attach additional pages if
	Transportation. Expenses	Lodging Expenses	Meal. Expenses	Other Expenses (Amount & Description)
Good Faith Estimate Actual Amount	\$7,052	\$705	\$625	\$1,084 - meeting room expenses and conference fees
penses for Accon	apanying Spouse or I	Dependent Child	(if applicable)	•
	Transportation Expenses	Lodging Expenses	Ment	Other Expenses (Amount & Description)
Good Faith Estimate Actual Amount	\$7,052	-0-	\$625	\$1,084- meeting room expenses and conference fees
_	on of all meetings as	nd events attende	ed. See Senate Rule	35.2(c)(6). (Attach additional pages
			·	
evide a description (SEE ATTACHED) ETERMINATION TO FICEHOLDER, AND	HAT THE TRAVE	L DESCRIBED ABO	35.2(c)(6). (Attach additional pages over was in connection with NCE THAT I WAS USING PUBLIC

Form RE-3

(Signature of Senator Officer)

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